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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	0075.00
	First Named Inventor	Hastedt, Jayne E.
	<i>COMPLETE IF KNOWN</i>	
	Application Number	10/032,238
	Filing Date	December 21, 2001
	Group Art Unit	
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Storage Stable Powder Compositions of Interleukin-4 Receptor

the specification of which (Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) December 21, 2001 as United States Application Number or PCT International

Application Number 10/032,238 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/256,786	12/21/2000	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number OR
☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Jayne E.	Hastedt

Inventor's Signature	<i>Jayne E. Hastedt</i>			Date	08/16/02
Residence: City	San Carlos	State	CA	Country	U.S.A.
Post Office Address	777 Knoll Drive				
Post Office Address					
City	San Carlos	State	CA	ZIP	94070
				Country	

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kirsten M.		Cabot	
Inventor's Signature <i>Kell Cabot</i>		Date <i>26 Mar 02</i>	
Residence: City San Francisco	State Ca	Country U.S.A.	Citizenship U.S.A.
Mailing Address 21 Quintara Street			
Mailing Address			
City San Francisco	State CA	ZIP 94116	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
David		Gong	
Inventor's Signature		Date	
Residence: City San Francisco	State CA	Country U.S.A.	Citizenship U.S.A.
Mailing Address 748 19th Avenue			
Mailing Address			
City San Francisco	State Ca	ZIP 94121	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Dennis M.		Hester	
Inventor's Signature		Date	
Residence: City Richmond	State Ca	Country U.S.A.	Citizenship U.S.A.
Mailing Address 6 Seagull Drive			
Mailing Address			
City Richmond	State CA	ZIP 94804	Country

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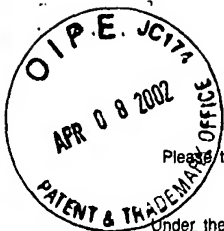
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Kirsten M.		Cabot	
Inventor's Signature		Date	
Residence: City San Francisco	State Ca	Country U.S.A.	Citizenship U.S.A.
Mailing Address 21 Quintara Street			
Mailing Address			
City San Francisco	State CA	ZIP 94116	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
David K.		Gong	
Inventor's Signature <i>D. K. Gong</i>		Date 20 Mar 02	
Residence: City <i>FOSTER CITY</i>	State CA	Country U.S.A.	Citizenship U.S.A.
Mailing Address <i>748 19th Avenue</i> <i>888 FOSTER CITY BLVD #D1</i>			
Mailing Address			
City San Francisco	State CA	ZIP 94121	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Dennis M.		Hester	
Inventor's Signature		Date	
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Mailing Address 6 Seagull Drive			
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David		Gong	
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Residence: City San Francisco	State CA	Country U.S.A.	Citizenship U.S.A.
Mailing Address 748 19th Avenue			
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Dennis M.		Hester	
Inventor's Signature 		Date 22 Mar 02	
Residence: City Richmond	State Ca	Country U.S.A.	Citizenship U.S.A.
Mailing Address 6 Seagull Drive			
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City Richmond	State CA	ZIP 94804	Country

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